

## DO/EO WORKSHEET

Paralegal/National Stage Division

U.S. Appl. No. 10/524844International Appl. No. JP03/10521Application filed by: ☐ 20 months ☒ 30 months

## WIPO PUBLICATION INFORMATION:

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## INTERNATIONAL APPLICATION PAPERS IN THE APPLICATION FILE:

☒ International Application (RECORD COPY)☐ Article 19 Amendments☐ PCT/IPEA/409 IPER: ☐ EP ☐ JP ☐ SE ☐ AU☐ US ☐ FR ☐ CN ☐ ES ☐ RU ☐ AT ☐ KR ☐ \_\_\_\_\_☐ Annexes to 409☒ Priority Document (s) No. 1☐ PCT/IB/331☒ Request form PCT/RO/101☐ PCT/ISA/210 - Search Report: ☐ EP ☐ JP ☐ SE ☐ AU☐ US ☐ FR ☐ CN ☐ ES ☐ RU ☐ AT ☐ KR ☐ \_\_\_\_\_☐ Search Report References☐ Other: \_\_\_\_\_

## RECEIPTS FROM THE APPLICANT (other than checked above):

☒ Basic National Fee (or authorization to charge)☒ Description ☒ Claims ☒ Abstract☒ Drawing Figure(s) - (# of drwgs. 5)☐ Translation of Article 19 Amendments☐ entered ☐ not entered:☐ not a page for page substitution  
☐ replaced by Article 34 Amendment☐ Annexes to 409☐ entered ☐ not entered:☐ not a page for page substitution  
☐ other: \_\_\_\_\_☐ Application Data Sheet☐ Power of Attorney/ Change of Address☒ Preliminary Amendment(s) Filed on:

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

☒ Information Disclosure Statement(s) Filed on:

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

☒ Assignment Document (forwarded to Assignment Branch)☐ Assignee PG Publication Notice☐ Substitute Specification Filed on:

1. \_\_\_\_\_ 2. \_\_\_\_\_

☐ Verified Small Status Statement☒ Oath/ Declaration (executed)☐ DNA Diskette☐ Sequence Listing☐ Other: \_\_\_\_\_

## NOTES:

☐ I.A. used as Specification ☐ Other: \_\_\_\_\_

35 U.S.C. 371 - Receipt of Request (PTO-1390)

Date Acceptable Oath/ Declaration Received.

Date of Completion of requirements under 35 U.S.C. 371

Date of Completion of ALL requirements (no EP requested)

Date of Completion of DO/EO 903 - Notification of Acceptance

Date of Completion of DO/EO 905 - Notification of Missing Requirements

Date of Completion of DO/EO 909 - Notification of Abandonment

Date of Completion of DO/EO 916 - Notification of Defective Response

Date of Completion of DO/EO 922

Date of Completion of DO/EO 923

17 Feb 05

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND																																																															
1 Date of Request: _____		2 Serial/Patent # <u>10/524844</u>																																																													
3 Please refund the following fee(s): <table style="width:100%; border-collapse: collapse;"> <tr><td style="width: 5%;"><input checked="" type="checkbox"/></td><td style="width: 60%;">Filing</td><td style="width: 15%;">1</td><td style="width: 15%;">2/17/05</td><td style="width: 5%;">\$</td><td style="width: 10%;">100</td></tr> <tr><td><input type="checkbox"/></td><td>Amendment</td><td></td><td></td><td>\$</td><td></td></tr> <tr><td><input type="checkbox"/></td><td>Extension of Time</td><td></td><td></td><td>\$</td><td></td></tr> <tr><td><input type="checkbox"/></td><td>Notice of Appeal/Appeal</td><td></td><td></td><td>\$</td><td></td></tr> <tr><td><input type="checkbox"/></td><td>Petition</td><td></td><td></td><td>\$</td><td></td></tr> <tr><td><input type="checkbox"/></td><td>Issue</td><td></td><td></td><td>\$</td><td></td></tr> <tr><td><input type="checkbox"/></td><td>Cert of Correction/Terminal Disc.</td><td></td><td></td><td>\$</td><td></td></tr> <tr><td><input type="checkbox"/></td><td>Maintenance</td><td></td><td></td><td>\$</td><td></td></tr> <tr><td><input type="checkbox"/></td><td>Assignment</td><td></td><td></td><td>\$</td><td></td></tr> <tr><td><input type="checkbox"/></td><td>Other</td><td></td><td></td><td>\$</td><td></td></tr> </table>	<input checked="" type="checkbox"/>	Filing	1	2/17/05	\$	100	<input type="checkbox"/>	Amendment			\$		<input type="checkbox"/>	Extension of Time			\$		<input type="checkbox"/>	Notice of Appeal/Appeal			\$		<input type="checkbox"/>	Petition			\$		<input type="checkbox"/>	Issue			\$		<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$		<input type="checkbox"/>	Maintenance			\$		<input type="checkbox"/>	Assignment			\$		<input type="checkbox"/>	Other			\$		4 PAPER NUMBER 5 DATE FILED 6 AMOUNT		
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TYPED/PRINTED NAME: <u>A Johnson</u> SIGNATURE: <u>A Johnson</u> OFFICE: <u>PCT</u>		TITLE: <u>paralegal</u> PHONE: <u>308-9140</u>																																																													
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